

Provider Inspection Summary
For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CA (AMBULATORY)

STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: LITTLE FALLS CBRF (510173)
Address: 4039 CTY HWY I, SPARTA, WI 54656
License Status: REGULAR
Licensed/Certified/Registered 01/01/1985
Regional Office: WESTERN REGION (EAU CLAIRE), (715) 836-4752

Survey History

Survey ID: 0096959 **End Date:** 04/26/2006 **Type:** STANDARD **Purpose:** SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10009832 Served 05/11/2006

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.32(2)(a)	INDIVIDUALIZED SERVICE PLAN-SCOPE		
83.41(10)(a)	BUILDING MAINTENANCE		
83.41(5)(d)4	APPROVED WELLS WATER SAMPLED ANNUALLY		
83.42(2)(a)	EVALUATION RESIDENT EVACUATION LIMITS		

Survey ID: 0095357 **End Date:** 08/12/2005 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0092865 **End Date:** 06/30/2004 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10006279 Served 07/02/2004

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.14(7)(b)	CONTINUING EDUCATION	12/31/2004	Yes

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Enforcement History

Date: 07/01/2004	SOD #10006279	Appealed: No
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Sanctions

COMPLY WITH REQUIREMENT

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